POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*(handwritten)*	7683!	
O.I.P.E. CLASSIFIER		X	02-25-00
FORMALITY REVIEW		69055	3-29-00
RESPONSE FORMALITY REVIEW		69055	5-1-00

INDEX OF CLAIMS

✔	Rejected		N		Non-elected
=	Allowed		I		Interference
–	(Through numeral)... Canceled		A		Appeal
÷	Restricted		O		Objected

Claim		Date
Final	Original	
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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